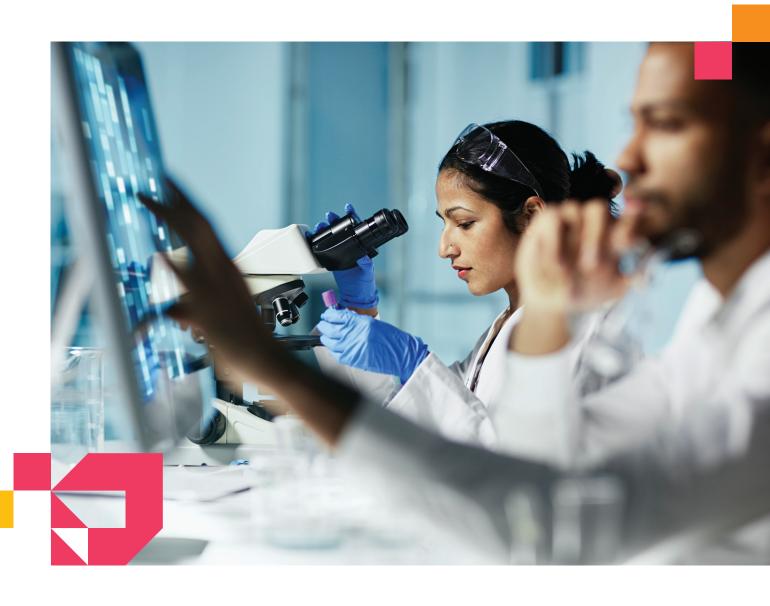
Economic footprint of the pharmaceutical industry in Europe

November 2024





Foreword

PwC are delighted to have had the opportunity to work with the European Federation of Pharmaceutical Industries and Associations (EFPIA) to produce this economic impact report, that calculates the size of EFPIA's economic footprint in the European economy.

At PwC our purpose is to build trust in society and solve important problems. Economic impact reports help us deliver on that purpose as they provide a more holistic view of the value created by firms beyond what financial reporting alone provides. Economic impact modelling considers the total value created by a firm's activity, including the wider value generated by its entire supply chain, and spending by its employees throughout the economy. EFPIA members play a critical role in the European economy. Therefore, obtaining a comprehensive understanding of the mechanisms underpinning their reach is essential for informing leaders and decision-makers.

This report also explores the wider context for the pharmaceutical industry's economic contribution to Europe. The report outlines their role in contributing to research and development that enables the highly productive nature of Europe's pharmaceutical sector.

It has been a pleasure working alongside EFPIA and the EFPIA member associations' staff. I hope you enjoy reading about their contribution to the European economy in this report.



Simon OatesPartner, Europe Economics
Advisory Lead

Executive Summary

The pharmaceutical industry in Europe¹ is highly productive compared to the economy as a whole, driven by consistently high levels of research and innovation. The sector contributed €311 billion GVA and 2.3 million jobs to the EU-27 economy in 2022.

Figure 1: Key findings on economic footprint of the pharmaceutical industry in Europe

163bn	€68bn	€80bn
rect	Indirect	Induced
	ո the EU27 in 2022	
.3m		
633,200	737,500	924,200
rect	Indirect	Induced
448bn	the EU27, Norway, Switze €102bn	rland and the UK in 2022 €120bn
448bn 2225bn		
448bn 2225bn irect	€102bn	€120bn Induced
448bn 2225bn irect	€102bn Indirect	€120bn Induced

^{1.} For the purpose of this report, 'Europe' and 'European' refers to the EU27, the United Kingdom, Switzerland, and Norway.

Pharmaceutical R&D has grown on average 4.4% per year since 2010. This has resulted in a strong and growing industry in the manufacture of innovative pharmaceuticals, contributing a total of €311bn of GVA to the EU-27 economy in 2022.

The innovative nature of the industry means the manufacture of pharmaceuticals in Europe is highly productive. With a GVA per worker of €225,000 the industry is approximately three times as productive as the European economy as a whole, and is more productive than other similar industries.

The industry's contribution to EU-27 GVA is made up of €163bn direct GVA, €68bn of indirect GVA through the European supply chain, and €80bn of induced GVA through employee spending.

The sector also supported 2.3 million jobs in the EU-27 economy, consisting of 633,200 direct employees, 737,500 indirect jobs through the supply chain, and 924,200 jobs induced through direct and indirect employee spending in the economy.

Between 2016² and 2022, the GVA contribution of the pharmaceutical industry has increased by 6.9% per year in real terms, and the employment contribution has increased by 2.2% per year. Manufacturing of innovative pharmaceuticals is therefore an important sector for economic growth in Europe.

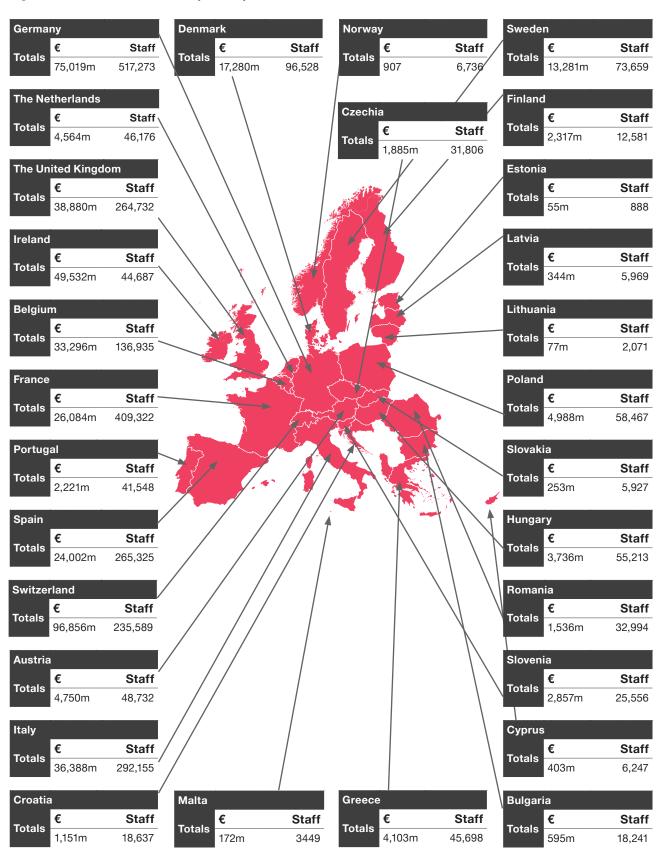
The industry is not, however, without its challenges. There is increased global competition in terms of R&D investment, growth in Europe was 4.4% per year between 2010 and 2022, whilst growth in the US was 5.5% and 20.7% for China. In recent years this growing gap in R&D investment between Europe, the US and China has been correlated with a relative decline in the number of European NME discoveries, compared to the US and China.

New Molecular Entities (NMEs), are new drugs with an active ingredient that is marketed for the first time; their discovery is a key product of R&D activity.



2. PwC (2019), "Economic and societal footprint of the pharmaceutical industry in Europe", for EFPIA. 2016 figures are from the previous iteration of the report, but have been inflation-adjusted to 2022 prices for comparability. For comparison purposes, percentage growth figures do not include Norway as this country was excluded from the previous report.

Figure 2: Economic contribution by country



Contents

2	Introduction	7
3	Methodology	9
4	Economic impact	12
	Gross Value Added (GVA) Employment GVA per employee R&D and global competition	13 14 15 17
4	Appendix	18



Introduction

In order to understand the total contribution of the manufacturing of pharmaceuticals industry in Europe, EFPIA has commissioned PwC to conduct a study focused on quantifying the economic impact of the industry.

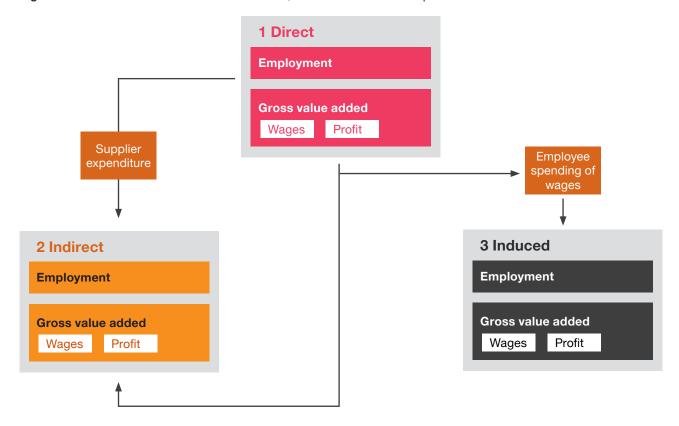
This work builds upon previous PwC analysis in 2019, and where possible this report presents where results have evolved over time.³ The analysis presented in this report includes the European Union (EU), the United Kingdom, Switzerland, and Norway⁴ (henceforth referred to as 'Europe').

The manufacture of pharmaceuticals is a subsector of the wider biopharmaceuticals industry. Whilst it is important to recognise that many EFPIA members may have productive activities in the wider

biopharmaceuticals industry, the focus of this analysis is the manufacture of innovative pharmaceuticals and vaccines; this approach provides consistency and comparability with the previous report.

PwC built Input-Output models for each domestic European economy to produce multipliers that estimate the total impact of the pharmaceuticals sector on the economy in Europe. These models allow us to capture the economic activity produced directly by the industry, the economic activity the industry indirectly supports through its supply chain, and the economic activity induced by direct and indirect employee spending in the wider economy. This concept of the economic impact is illustrated in Figure 3.

Figure 3: The interconnection between the direct, indirect and induced impact



EFPIA have inputted into the development of the report with information on R&D activities and NME discoveries in the pharmaceutical sector in Europe; PwC analysis of this information and all other data has been independent and EFPIA have not sought to influence this in any way.

This report outlines economic impacts in terms of two key indicators: Gross Value Added (GVA) and Employment. Additionally, we report GVA per employee as a proxy for the productivity of the industry.

The remainder of this report will present the methodology and findings from Input-Output analysis.

^{3.} PwC (2019), "Economic and societal footprint of the pharmaceutical industry in Europe", for EFPIA.

^{4.} Note that Norway was not included in the report produced in 2019 due to the lack of data available.



Methodology



We estimate the economic contribution of the manufacture of pharmaceuticals industry, defined using NACE⁵ code C21, in Europe.

This definition is consistent with the previous iteration of the report; it captures the core activity of EFPIA members and enables comparability with the previous report. It's important to note that the economic activity of the pharmaceuticals sector of some EFPIA members is beyond the scope of C21, and the industry in these countries will therefore have a larger overall economic footprint than is outlined in this report.

Our analysis examines how the manufacture of pharmaceuticals industry contributes to the economy through Gross Value Added (GVA)⁶ and employment. GVA is a measure for assessing the economic contribution of a company, industry, or sector and is equivalent to GDP, after excluding taxes on products (including imports), and adding subsidies on products (including any on imports). Employment captures the number of people (ILO definition⁷) who are directly employed in a given sector, who have a contract of employment and receive compensation in the form of salaries.

In addition to the direct economic contribution of the industry, we used Input-Output analysis to estimate the industry's broader economic contribution through its supply chain and employee spending. The total contribution is made up of direct, indirect and induced effects, which we define as follows:

- Direct impact: This is the contribution resulting from the manufacture of pharmaceuticals industry's own day-to-day operations in Europe. Direct GVA is calculated as the sum of returns to labour and capital, while direct employment is the total number of employees for the year, in terms of employment.
- Indirect impact: This is the impact on the economy
 of Europe as a result of the pharmaceuticals
 industry's procurement, which includes both the
 economic value added from immediate suppliers and
 the wider supplier chain (for instance, the suppliers
 of the EFPIA member countries' suppliers).
- Induced impact: This is the impact generated through the spending by employees throughout the value chain from their earnings, including pharmaceutical companies' employees and their suppliers' employees.

The relationship between these three channels is shown opposite in Figure 4.

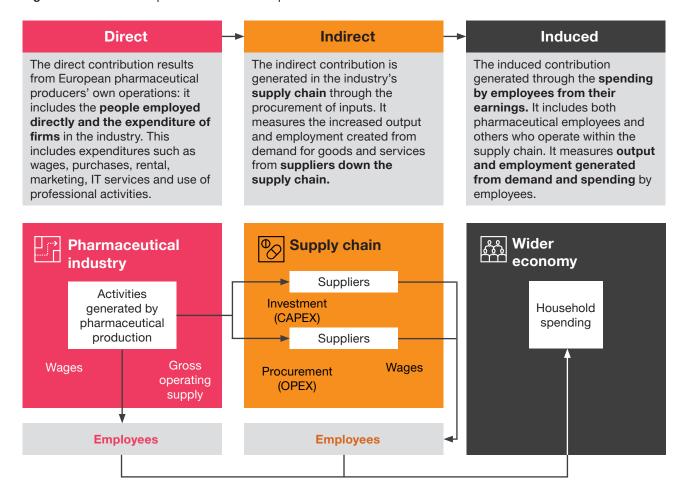
^{5.} We have defined the pharmaceutical industry as using NACE code C21 (Manufacture of basic pharmaceutical products and pharmaceutical preparations). NACE codes are a Europe-wide standard classification for businesses, which allow us to conduct analysis across countries consistently

^{6.} The formula to calculate GVA is: Direct GVA = Operating Profits + Depreciation + Amortisation + Direct employee costs. This measure is used in order to avoid potential double-counting, as it only includes the 'value added' at each stage of production.

^{7.} The International Labour Organisation (ILO) defines an employed person as anyone aged 16, or over, who has completed at least one hour of work in the reference week, or is temporarily away from his or her job, such as being on holiday.



Figure 4: The relationships across the three impact channels





Economic impact

Gross Value Added (GVA)

Table 1: The direct, indirect and induced GVA impact in 2016 and 2022 in the EU27 and Europe, in €m.

		GVA Impact (€m)		
		Direct	Supply Chain (Indirect)	Consumer Spending (Induced)
EU27	2016	107,600	48,100	57,800
	2022	162,700	68,000	80,200
Europe	2016	154,600	72,600	88,800
	2022	225,200	102,000	120,400

Source: PwC analysis. GVA is value added at factor cost - million Euro and all figures are in 2022 prices. Table 3 in the appendix contains a full list of data sources by nation.

In 2022, the pharmaceutical industry contributed a total of approximately €311 billion to EU27 GVA and €448 billion to European GVA.

This is made up of:

€163bn

Direct impact from business operations in the EU27, accounting for 6.8% of direct GVA in the EU27 manufacturing industry. The equivalent direct impact from business operations in Europe was €225 billion, accounting for 8.1% of direct GVA in the European manufacturing industry.



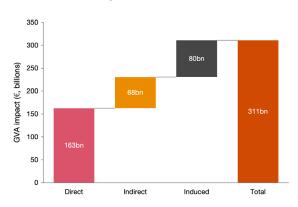
Indirect GVA impact in the EU27 (€102 billion in Europe), arising from pharmaceutical manufacturing supply chains.



Induced GVA impact (€120 billion for Europe) arising from workers' spending in the EU27.

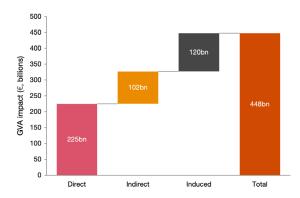
Total GVA in this sector accounts for 2.0% of total GVA in EU27 countries and 2.6% of the total GVA in Europe.

Figure 5: GVA contribution of the pharmaceuticals sector in the EU27, 2022⁸



Source: PwC analysis. GVA is value added at factor cost - million Euro and all figures are in 2022 prices. Table 3 in the appendix contains a full list of data sources by nation.

Figure 6: GVA contribution of the pharmaceuticals sector in Europe, 2022⁹



Source: PwC analysis. GVA is value added at factor cost - million Euro and all figures are in 2022 prices. Table 3 in the appendix contains a full list of data sources by nation.

^{8.} Figures are in 2022 prices.

^{9.} Figures are in 2022 prices.

Employment

Table 2: The direct, indirect and induced employment impact 2016 and 2022 in the EU27 and Europe.

		Employment Impact (total employment, ILO definition)		
		Direct	Supply Chain (Indirect)	Consumer Spending (Induced)
EU27	2016	558,300	659,600	824,600
	2022	633,200	737,500	924,200
Europe	2016	643,400	785,400	1,068,600
	2022	729,600	879,300	1,193,500

Source: PwC analysis. Table 3 in the appendix contains a full list of data sources by nation.

In 2022, the pharmaceutical industry supported a total of approximately 2.3 million jobs in the EU27 economy and 2.8 million jobs in the European economy.

This is made up of:

633,200

people employed directly by the industry for EU27 countries and 729,600 direct employees in the European economy.

737,500

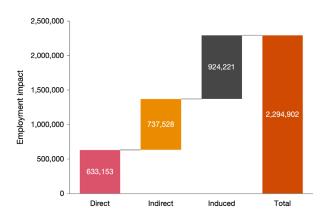
people employed in the industry's EU27 supply chain, and 879,300 people employed in the industry's European supply chain.

924,200

jobs that are supported by pharmaceutical and supply chain workers spending money in the EU27 economy. The equivalent figure for Europe is 1,193,500.

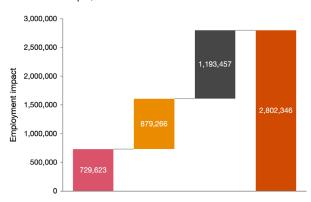
The jobs supported by the pharmaceutical sector account for 1.0% of employment in the EU27 and 1.3% of employment for Europe. Activity in the pharmaceutical sector supported 7.6% of the total manufacturing employment in the EU27 and 7.7% of total manufacturing employment in Europe.

Figure 7: Employment contribution of the pharmaceuticals sector in the EU27, 2022



Source: PwC analysis. Table 3 in the appendix contains a full list of data sources by nation.

Figure 8: Employment contribution of the pharmaceuticals sector in Europe, 2022



Source: PwC analysis. Table 3 in the appendix contains a full list of data sources by nation.



GVA per employee

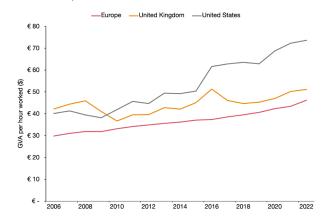
Prior to the 2008 financial crisis, GVA per hour worked was similar in the US and UK, and approximately 25% lower in the EU27.

Between 2008 and 2022, US productivity per hour has close to doubled. Over the same period productivity in the UK and EU27 has grown at a much slower rate, with US GVA per hour around double that of the EU27 and around a third higher than the UK in 2021. As referred to in a recent report by the European Commission¹⁰, there is significant focus on improving productivity amongst European policymakers.

The pharmaceutical industry is highly productive. In every country analysed in this report, productivity per worker is higher in the pharmaceutical industry than in the economy as a whole. Investment in the sector therefore has potential to contribute to regaining momentum in productivity growth.

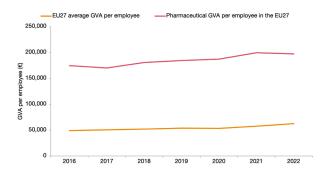
The innovative nature of the industry means the manufacture of pharmaceuticals in Europe is highly productive. With a GVA per worker of €225,000 the industry is approximately three times as productive as the European economy as a whole, and is more productive than other similar industries. When considering the EU27 alone, the pharmaceutical industry directly contributed an average €197,200 of direct GVA for every direct employee in 2022. Additionally, the productivity in the manufacture of pharmaceuticals sector is growing relatively faster compared to other sectors.

Figure 9: GVA per hour worked in Europe (EU27), the UK and the US, 2005 to 2022



Source: GVA data from World data, Employment data from OECD, Hours worked per employee data from OECD, PwC analysis.

Figure 10: Comparison of GVA per employee of the pharmaceutical industry to the national average GVA in the EU27, 2016-2022¹¹



Source: PwC analysis. GVA is value added at factor cost - million Euro and all figures are in 2022 prices. Table 3 in the appendix contains a full list of data sources by nation.

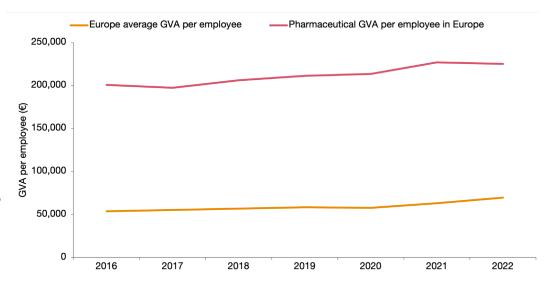
^{10.} EU competitiveness: Looking ahead, European Commission (September 2024)

^{11.} Figures are in 2022 prices. Note that data over time was not available for Ireland so this figure includes an interpolation to produce data in the range between 2016 and 2022.



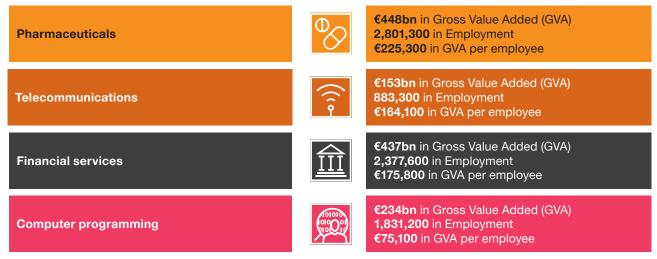
Figure 11: Comparison of GVA per employee of the pharmaceuticals sector to the national average GVA in Europe, 2016-2022¹²

Source: PwC analysis. GVA is value added at factor cost - million Euro and all figures are in 2022 prices. Table 3 in the appendix contains a full list of data sources by nation.



The pharmaceuticals sector is also more productive compared to similar key industries. For example, the GVA per employee in the telecommunications industry is €164,100, and the GVA per employee in the financial services industry is €175,800. Figure 12 below compares GVA per employee in similar industries to the pharmaceuticals sector in Europe.

Figure 12: Economic contribution of the pharmaceuticals sector versus other key industries in Europe (2021)¹³



Source: Table 3 in the appendix contains a full list of data sources by nation for the pharmaceuticals sector, PwC analysis. Eurostat (2021) for other sectors, PwC analysis.

^{12.} Figures are in 2022 prices. Note that data over time was not available for Ireland so this figure includes an interpolation to produce data in the range between 2016 and 2022.

^{13.} Eurostat (2024), "Enterprises by detailed NACE Rev.2 activity and special aggregates". Figures are in 2022 prices. The latest data available for other industries was 2021 to produce the average European productivity level for each sector, and these are compared to the 2022 results for the pharmaceutical industry. GVA per employee is rounded to the nearest hundred for other European industries.



Whilst the pharmaceutical industry in Europe is highly productive and growing, investment is important in maintaining this activity. Europe and the US had similar levels of R&D expenditure until 2014.

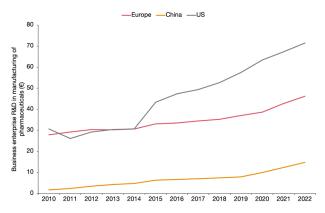
Thereafter the US has consistently invested the highest level of R&D in pharmaceuticals, and the gap is widening (see Figure 13). In Europe, R&D expenditure in pharmaceuticals has grown an average of 4.4% each year between 2010 and 2022, from €27.8 billion to €46.2 billion. In the US, R&D expenditure in pharmaceuticals has grown an average of 5.5% each year over the same period, from €30.7 billion to €71.5 billion.

Whilst in absolute terms R&D investment in China has been growing at a similar rate to Europe since 2010, the China trend starts at a low base such that relative growth is much higher than both Europe and the US in percentage terms. In China, pharmaceutical R&D expenditure has increased by an average of 20.7% each year over the same period, from €1.7 billion to €14.8 billion.

These changing growth rates of R&D expenditure are reflected in the pattern of New Molecular Entities (NMEs) discoveries worldwide. NMEs are new drugs with an active ingredient that is marketed for the first time; their discovery is a key product of R&D activity.

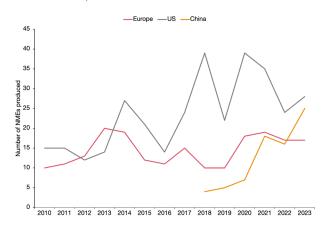
NME growth has been increasing in China since 2018¹⁵. Despite investment being approximately 25% of European investment in 2022, China achieved a similar number of NMEs in 2022 and more than Europe in 2023. NME discoveries were similar between US and Europe until 2013, with significant divergence since (reflecting higher US R&D spend). Between 2018 and 2023, 91 NMEs originated in Europe. This compares to 187 NMEs from the US and 75 NMEs from China. The trend of NMEs originating in the US, Europe, and China over time is presented in Figure 14.

Figure 13: R&D investment in the pharmaceuticals industry (billion, €) by territory, from 2010 to 2022¹⁴



Source: EFPIA member associations, PhRMA, China Statistical Yearbook, 2024

Figure 14: Number of NMEs originating in Europe, the US and China, 2010 to 2023



Source: Citeline April 2024 & SCRIP Publications - EFPIA calculations, PwC analysis.

^{14.} Figures are in 2022 prices. Note that data over time was not available for Ireland so this figure includes an interpolation to produce data in the range between 2016 and 2022. This figure does include Norway data over time.

^{15.} Data is not available for China prior to 2018 because it was included in 'other' category due to low levels.



Appendix

Appendix

Table 3: Data sources by country for GVA and employment.

Country	Employment
Austria	2020 enterprise data updated with national accounts growth rate to 2022 (employment and GVA). Source: Eurostat.
Belgium	2020 enterprise data updated with national accounts growth rate to 2022 (GVA). Source: Eurostat. Employment 2022 production data. Source: EFPIA.
Bulgaria	2020 enterprise data updated with national accounts growth rate to 2022 (employment). GVA method 1, 2019 enterprise data updated using growth rate from a range with the upper bound of 25% (Slovenia) and the lower bound of 3% (Cyprus). Source: Eurostat.
Croatia	2020 enterprise data updated with national accounts growth rate to 2022 (employment and GVA). Source: Eurostat.
Cyprus	2020 enterprise data updated with national accounts growth rate to 2022 (employment and GVA). Source: Eurostat.
Czechia	2020 enterprise data updated with national accounts growth rate to 2022 (employment and GVA). Source: Eurostat.
Denmark	2022 employment data. Source: Denmark Statistics. GVA method 1, 2020 enterprise data updated using growth rate from a range with the upper bound of 15% (Germany) and the lower bound of 7% (the Netherlands). Source: Eurostat.
Estonia	2020 enterprise data updated with national accounts growth rate to 2022 (employment and GVA). Source: Eurostat.
Finland	2020 enterprise data updated with national accounts growth rate to 2022 (employment and GVA). Source: Eurostat.
France	2020 enterprise data updated with national accounts growth rate to 2022 (employment and GVA). Source: Eurostat.
Germany	2020 enterprise data updated with national accounts growth rate to 2022 (GVA). Source: Eurostat. Employment 2022 with multiplier applied to estimate the size of "enterprise data" as the definition changes in 2017/18. Source: EFPIA production data.
Greece	2020 enterprise data updated with national accounts growth rate to 2022 (employment and GVA). Source: Eurostat.
Hungary	2020 enterprise data updated with national accounts growth rate to 2022 (employment and GVA). Source: Eurostat.
Ireland	Employment Method 2, 2022 national data, with percentage of the size of the pharmaceutical industry applied. Source: Eurostat. Employment 2022 with multiplier applied to estimate the size of "enterprise data" as data not available past 2014. Source: IDA.
Italy	2020 enterprise data updated with national accounts growth rate to 2022 (employment and GVA). Source: Eurostat.
Latvia	2020 enterprise data updated with national accounts growth rate to 2022 (employment and GVA). Source: Eurostat.
Lithuania	2022 employment and GVA data. Source: Lithuania Official Statistics.
Malta	2020 enterprise data updated with national accounts growth rate to 2022 (employment and GVA). Source: Eurostat.
Netherlands	2020 enterprise data updated with national accounts growth rate to 2022 (employment and GVA). Source: Eurostat
Norway	Data provided by Norway (2022). Data was not available or considered less reliable. Figures were tested for comparability.
Poland	2020 enterprise data updated with national accounts growth rate to 2022 (employment and GVA). Source: Eurostat.
Portugal	2020 enterprise data updated with national accounts growth rate to 2022 (employment and GVA). Source: Eurostat.
Romania	2020 enterprise data updated with national accounts growth rate to 2022 (employment and GVA). Source: Eurostat.
Slovakia	2020 enterprise data updated with national accounts growth rate to 2022 (employment and GVA). Source: Eurostat.
Slovenia	Method 2, 2022 national data, with percentage of the size of the pharmaceutical industry applied (GVA and employment). Source: Eurostat.
Spain	2020 enterprise data updated with national accounts growth rate to 2022 (employment and GVA). Source: Eurostat.
Sweden	Method 1, GVA and employment. GVA upper bound 15% (Germany) and lower bound 7% (the Netherlands). Employment upper bound 12% (Austria) and lower bound 1% (Slovakia). Range narrowed using data source provided by Sweden.
Switzerland	2022 Switzerland data from report provided (GVA and employment).
United Kingdom	Employment: Business Register Data 2022. GVA: GDP Low Level Aggregates data 2022. Source: ONS. Employment and GVA data were not available from Eurostat due to the UK's exit from the European Union.

Table 4: Data sources by country for R&D investment.

pharma.be (firms doing basic research on medicines for human use in Belgium) 30 Jugaria 2018: KPMG; 2021: estimate based on data triangulation from several data sources Croatian Employers Association (HUP) & Association of Employers in Healthcare Cyprus EFPIA data Czechia Eurostat; CZSO (2018); AIFP study Innovation for Life (2019) Denmark Statistics Denmark Statistics Denmark Statistics Denmark Stonia No data available Finland Pharma Industry Finland +Orion France Ministry of Research Germany Stiffverband (Association for the Promotion of Sciences and Humanities) Greece National Ethics Committee (2011 clinical research), IOVE (as of 2013); Eurostat (2015); GSRI (General Secretariat for Research & Innovation - 2020) Hungary Hungarian Central Statistical Office (KSH) reland PCI until 2012, Industrial Development Association (IDA) as of 2013 tally Farmindustria elaboration on Istat No data available No data available Malta No data available Malta No data available Notherlands CBS - Nefarma estimate as of 2007 (10% of private business R&D spending) Norway LMI yearly R&D inquiry Poland Central Statistical Office Portugal IPCTN Romania ARPIM estimate Slovakia No data available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products)	Country	Employment
2018: KPMG; 2021: estimate based on data triangulation from several data sources Croatia Croatian Employers Association (HUP) & Association of Employers in Healthcare Cyprus EFPIA data Eurostat; CZSO (2018): AIFP study Innovation for Life (2019) Denmark Statistics Denmark Statistics Denmark Statistics Denmark Stonia No data available Finland Pharma Industry Finland +Orion France Ministry of Research Germany Stiffverband (Association for the Promotion of Sciences and Humanities) Greece National Ethics Committee (2011 clinical research), IOVE (as of 2013); Eurostat (2015); GSRI (General Secretariat for Research & Innovation - 2020) Hungary Hungarian Central Statistical Office (KSH) Peland PCI until 2012, Industrial Development Association (IDA) as of 2013 tally Farmindustria elaboration on Istat No data available No data available No data available No data available Notherhands CBS - Nefarma estimate as of 2007 (10% of private business R&D spending) Norway LMI yearly R&D inquiry Poland Central Statistical Office Portugal IPCTN Romania ARPIM estimate Slovakia No data available prior to 2020 so excluded Forum estimate based on latest available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products)	Austria	Statistik Austria
Croatia Croatian Employers Association (HUP) & Association of Employers in Healthcare Dyprus EFPIA data Czechia Eurostat; CZSO (2018); AIFP study Innovation for Life (2019) Denmark Statistics Denmark Statistics Denmark Statistics Denmark Stonia No data available Finland Pharma Industry Finland +Orion France Ministry of Research Germany Stiffverband (Association for the Promotion of Sciences and Humanities) Greece National Ethics Committee (2011 clinical research), IOVE (as of 2013); Eurostat (2015); GSPI (General Secretariat for Research & Innovation - 2020) Fungary Hungarian Central Statistical Office (KSH) Freland PCI until 2012, Industrial Development Association (IDA) as of 2013 taly Farmindustria elaboration on Istat No data available Malta No data available Netherlands OBS - Nefarma estimate as of 2007 (10% of private business R&D spending) Norway LMI yearly R&D inquiry Poland Central Statistical Office Portugal IPCTN ARPIM estimate Slovakia No data available prior to 2020 so excluded Slovenia Forum estimate based on latest available Slovenian Statistics Office data (2016) Spein Data include intra-mural and extra-mural R&D 2019-2021; Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products)	Belgium	pharma.be (firms doing basic research on medicines for human use in Belgium)
EFPIA data Eurostat; CZSO (2018); AIFP study Innovation for Life (2019) Denmark Statistics Denmark Statistics Denmark Stonia No data available Finland Pharma Industry Finland +Orion France Ministry of Research Germany Stiftverband (Association for the Promotion of Sciences and Humanities) Greece National Ethics Committee (2011 clinical research), IOVE (as of 2013); Eurostat (2015); GSRI (General Secretariat for Research & Innovation - 2020) Hungary Hungarian Central Statistical Office (KSH) reland PCI until 2012, Industrial Development Association (IDA) as of 2013 taly Farmindustria elaboration on Istat No data available Malta No data available Melta No data available Netherlands CBS - Nefarma estimate as of 2007 (10% of private business R&D spending) Norway LMI yearly R&D inquiry Poland Central Statistical Office Portugal IPCTN Romania ARPIM estimate Slovakia No data available prior to 2020 so excluded Slovenia Forum estimate based on latest available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products)	Bulgaria	2018: KPMG; 2021: estimate based on data triangulation from several data sources
Eurostat; CZSO (2018); AIFP study Innovation for Life (2019) Denmark Statistics Denmark Statistics Denmark Statistics Denmark Statistics Denmark Statistics Denmark Statistics Denmark Storia No data available Finland Pharma Industry Finland +Orion France Ministry of Research Germany Stiftverband (Association for the Promotion of Sciences and Humanities) Greece National Ethics Committee (2011 clinical research), IOVE (as of 2013); Eurostat (2015); GSRI (General Secretariat for Research & Innovation - 2020) Hungary Hungarian Central Statistical Office (KSH) reland PCI until 2012, Industrial Development Association (IDA) as of 2013 tally Farmindustria elaboration on Istat No data available Malta No data available Nother and Statistical Office Norway LMI yearly R&D inquiry Poland Central Statistical Office Portugal IPCTN Romania ARPIM estimate Slovakia No data available prior to 2020 so excluded Slovenia Forum estimate based on latest available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products)	Croatia	Croatian Employers Association (HUP) & Association of Employers in Healthcare
Denmark Statistics Denmark Estonia No data available Finland Pharma Industry Finland +Orion France Ministry of Research Germany Stiftverband (Association for the Promotion of Sciences and Humanities) Greece National Ethics Committee (2011 clinical research), IOVE (as of 2013); Eurostat (2015); GSRI (General Secretariat for Research & Innovation - 2020) Hungary Hungarian Central Statistical Office (KSH) Feland PCI until 2012, Industrial Development Association (IDA) as of 2013 tally Farmindustria elaboration on Istat Latvia No data available Malta No data available Malta No data available Netherlands CBS - Nefarma estimate as of 2007 (10% of private business R&D spending) Norway LMI yearly R&D inquiry Poland Central Statistical Office Portugal IPCTN Romania ARPIM estimate Slovakia No data available prior to 2020 so excluded Slovakia Forum estimate based on latest available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products)	Cyprus	EFPIA data
Sistonia No data available Finland Pharma Industry Finland +Orion France Ministry of Research Germany Stiffverband (Association for the Promotion of Sciences and Humanities) Greece National Ethics Committee (2011 clinical research), IOVE (as of 2013); Eurostat (2015); GSRI (General Secretariat for Research & Innovation - 2020) Hungary Hungarian Central Statistical Office (KSH) Feland PCI until 2012, Industrial Development Association (IDA) as of 2013 tally Farmindustria elaboration on Istat No data available Lithuania No data available Netherlands CBS - Nefarma estimate as of 2007 (10% of private business R&D spending) Norway LMI yearly R&D inquiry Poland Central Statistical Office Portugal IPCTN Romania ARPIM estimate Slovakia No data available prior to 2020 so excluded Slovenia Forum estimate based on latest available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products) Switzerland Interpharma	Czechia	Eurostat; CZSO (2018); AIFP study Innovation for Life (2019)
Pharma Industry Finland + Orion France Ministry of Research Germany Stiffverband (Association for the Promotion of Sciences and Humanities) Greece National Ethics Committee (2011 clinical research), IOVE (as of 2013); Eurostat (2015); GSRI (General Secretariat for Research & Innovation - 2020) Hungary Hungarian Central Statistical Office (KSH) reland PCI until 2012, Industrial Development Association (IDA) as of 2013 tally Farmindustria elaboration on Istat No data available Lithuania No data available Netherlands CBS - Nefarma estimate as of 2007 (10% of private business R&D spending) Norway LMI yearly R&D inquiry Poland Central Statistical Office Portugal IPCTN Romania ARPIM estimate Slovakia No data available prior to 2020 so excluded Slovenia Forum estimate based on latest available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products) Switzerland Interpharma	Denmark	Statistics Denmark
France Ministry of Research Germany Stiftverband (Association for the Promotion of Sciences and Humanities) Greece National Ethics Committee (2011 clinical research), IOVE (as of 2013); Eurostat (2015); GSRI (General Secretariat for Research & Innovation - 2020) Hungary Hungarian Central Statistical Office (KSH) reland PCI until 2012, Industrial Development Association (IDA) as of 2013 tally Farmindustria elaboration on Istat Latvia No data available Malta No data available Notherlands CBS - Nefarma estimate as of 2007 (10% of private business R&D spending) Norway LMI yearly R&D inquiry Poland Central Statistical Office Portugal IPCTN Romania ARPIM estimate Slovakia No data available prior to 2020 so excluded Slovenia Forum estimate based on latest available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products) Switzerland Interpharma	Estonia	No data available
Stiftverband (Association for the Promotion of Sciences and Humanities) Greece National Ethics Committee (2011 clinical research), IOVE (as of 2013); Eurostat (2015); GSRI (General Secretariat for Research & Innovation - 2020) Hungary Hungarian Central Statistical Office (KSH) reland PCI until 2012, Industrial Development Association (IDA) as of 2013 tally Farmindustria elaboration on Istat Latvia No data available Malta No data available Not data available Notherlands CBS - Nefarma estimate as of 2007 (10% of private business R&D spending) Norway LMI yearly R&D inquiry Poland Central Statistical Office Portugal IPCTN Romania ARPIM estimate Slovakia No data available prior to 2020 so excluded Slovenia Forum estimate based on latest available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products) Switzerland Interpharma	Finland	Pharma Industry Finland +Orion
National Ethics Committee (2011 clinical research), IOVE (as of 2013); Eurostat (2015); GSRI (General Secretariat for Research & Innovation - 2020) Hungary Hungarian Central Statistical Office (KSH) reland PCI until 2012, Industrial Development Association (IDA) as of 2013 tally Farmindustria elaboration on Istat No data available No data available Malta No data available Netherlands CBS - Nefarma estimate as of 2007 (10% of private business R&D spending) Norway LMI yearly R&D inquiry Poland Central Statistical Office Portugal IPCTN Romania ARPIM estimate Slovakia No data available prior to 2020 so excluded Slovenia Forum estimate based on latest available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products) Switzerland Interpharma	France	Ministry of Research
tariat for Research & Innovation - 2020) Hungary Hungarian Central Statistical Office (KSH) reland PCI until 2012, Industrial Development Association (IDA) as of 2013 taly Farmindustria elaboration on Istat _atvia No data available Lithuania No data available Malta No data available Netherlands CBS - Nefarma estimate as of 2007 (10% of private business R&D spending) Norway LMI yearly R&D inquiry Poland Central Statistical Office Portugal IPCTN Romania ARPIM estimate Slovakia No data available prior to 2020 so excluded Slovenia Forum estimate based on latest available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products) Switzerland Interpharma	Germany	Stiftverband (Association for the Promotion of Sciences and Humanities)
reland PCI until 2012, Industrial Development Association (IDA) as of 2013 taly Farmindustria elaboration on Istat .atvia No data available Lithuania No data available Malta No data available Netherlands CBS - Nefarma estimate as of 2007 (10% of private business R&D spending) Norway LMI yearly R&D inquiry Poland Central Statistical Office Portugal IPCTN Romania ARPIM estimate Slovakia No data available prior to 2020 so excluded Slovakia No data available prior to 2020 so excluded Slovenia Forum estimate based on latest available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products) Switzerland Interpharma	Greece	National Ethics Committee (2011 clinical research), IOVE (as of 2013); Eurostat (2015); GSRI (General Secretariat for Research & Innovation - 2020)
Farmindustria elaboration on Istat Latvia No data available Lithuania No data available Malta No data available Netherlands CBS - Nefarma estimate as of 2007 (10% of private business R&D spending) Norway LMI yearly R&D inquiry Poland Central Statistical Office Portugal IPCTN Romania ARPIM estimate Slovakia No data available prior to 2020 so excluded Slovenia Forum estimate based on latest available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products) Switzerland Interpharma	Hungary	Hungarian Central Statistical Office (KSH)
Latvia No data available Lithuania No data available Malta No data available Netherlands CBS - Nefarma estimate as of 2007 (10% of private business R&D spending) Norway LMI yearly R&D inquiry Poland Central Statistical Office Portugal IPCTN Romania ARPIM estimate Slovakia No data available prior to 2020 so excluded Slovenia Forum estimate based on latest available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products) Switzerland Interpharma	Ireland	PCI until 2012, Industrial Development Association (IDA) as of 2013
No data available Malta No data available Netherlands CBS - Nefarma estimate as of 2007 (10% of private business R&D spending) Norway LMI yearly R&D inquiry Poland Central Statistical Office Portugal IPCTN Romania ARPIM estimate Slovakia No data available prior to 2020 so excluded Slovenia Forum estimate based on latest available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products) Switzerland Interpharma	Italy	Farmindustria elaboration on Istat
Malta No data available Netherlands CBS - Nefarma estimate as of 2007 (10% of private business R&D spending) Norway LMI yearly R&D inquiry Poland Central Statistical Office Portugal IPCTN Romania ARPIM estimate Slovakia No data available prior to 2020 so excluded Slovenia Forum estimate based on latest available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products) Switzerland Interpharma	Latvia	No data available
Netherlands CBS - Nefarma estimate as of 2007 (10% of private business R&D spending) Norway LMI yearly R&D inquiry Poland Central Statistical Office Portugal IPCTN Romania ARPIM estimate Slovakia No data available prior to 2020 so excluded Slovenia Forum estimate based on latest available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products) Switzerland Interpharma	Lithuania	No data available
Norway LMI yearly R&D inquiry Central Statistical Office Portugal IPCTN Romania ARPIM estimate Slovakia No data available prior to 2020 so excluded Forum estimate based on latest available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products) Switzerland Interpharma	Malta	No data available
Poland Central Statistical Office Portugal IPCTN Romania ARPIM estimate Slovakia No data available prior to 2020 so excluded Slovenia Forum estimate based on latest available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products) Switzerland Interpharma	Netherlands	CBS - Nefarma estimate as of 2007 (10% of private business R&D spending)
Portugal IPCTN Romania ARPIM estimate Slovakia No data available prior to 2020 so excluded Slovenia Forum estimate based on latest available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products) Switzerland Interpharma	Norway	LMI yearly R&D inquiry
Romania ARPIM estimate Slovakia No data available prior to 2020 so excluded Slovenia Forum estimate based on latest available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products) Switzerland Interpharma	Poland	Central Statistical Office
Slovakia No data available prior to 2020 so excluded Slovenia Forum estimate based on latest available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products) Switzerland Interpharma	Portugal	IPCTN
Slovenia Forum estimate based on latest available Slovenian Statistics Office data (2016) Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products) Switzerland Interpharma	Romania	ARPIM estimate
Spain Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products) Switzerland Interpharma	Slovakia	No data available prior to 2020 so excluded
Sweden LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products) Switzerland Interpharma	Slovenia	Forum estimate based on latest available Slovenian Statistics Office data (2016)
Switzerland Interpharma	Spain	Data include intra-mural and extra-mural R&D 2019-2021: Farmaindustria survey
·	Sweden	LIF members survey prior to 2013; Statistics Sweden (pharmaceutical products)
Jnited Kingdom ONS Business Enterprise Research & Development; 2021 (OHE estimate)	Switzerland	Interpharma
	United Kingdom	ONS Business Enterprise Research & Development; 2021 (OHE estimate)
United States Pharmaceutical Research and Manufacturers of America, PhRMA Annual Survey, 2019	United States	Pharmaceutical Research and Manufacturers of America, PhRMA Annual Survey, 2019
China China Statistical Yearbook 2002-2022	China	China Statistical Yearbook 2002-2022



Thank you

pwc.co.uk

© This document has been prepared for the European Federation of Pharmaceutical Industries and Associations (EFPIA) and solely for the purpose and on the terms agreed with EFPIA. We accept no liability (including for negligence) to anyone else in connection with this document, and it may not be provided to anyone else.

© 2024 PwC. All rights reserved. Not for further distribution without the permission of PwC. "PwC" refers to the network of member firms of PricewaterhouseCoopers International Limited (PwCIL), or, as the context requires, individual member firms of the PwC network. Each member firm is a separate legal entity and does not act as agent of PwCIL or any other member firm. PwCIL does not provide any services to clients. PwCIL is not responsible or liable for the acts or omissions of any of its member firms nor can it control the exercise of their professional judgement or bind them in any way. No member firm is responsible or liable for the acts or omissions of any other member firm nor can it control the exercise of another member firm's professional judgement or bind another member firm or PwCIL in any way.